## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

**Application or Docket Number** 

09753128

| CLAIMS AS FILED - PART I<br>(Column 1)  |  |   |              |                               | (Column 2)                   |                  | SMALL ENTITY TYPE   |                        | OR            | OTHER THAN SMALL ENTITY |                        |
|---|--|---|--------------|-------------------------------|------------------------------|------------------|---------------------|------------------------|---------------|-------------------------|------------------------|
| TOTAL CLAIMS  |  |   | 89           |                               |                              |                  | RATE                | FEE                    | 1             | RATE                    | FEE                    |
| FOR   |  |   | NUMBER FILED |                               | NUMB                         | ER EXTRA         | BASIC FE            | E 355.00               | OR            | BASIC FEE               | 710.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | ∑9 minus 20= |                               | . 69                         |                  | X\$ 9=              | 621                    | OR            | X\$18=                  |                        |
| INDEPENDENT CLAIMS  |  |   | minus 3 =    |                               | • 5                          |                  | X40=                | 200                    | OR            | X80=                    |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |              |                               |                              |                  | +135=               | 135                    | OR            | +270=                   |                        |
| * If the difference in column 1 is less than zero, enter  |  |   |              |                               | r "0" in d                   | column 2         | TOTAL               | 1311                   | OR            |                         |                        |
| CLAIMS AS AMENDED - PART II   |  |   |              |                               |                              |                  |                     |                        | <b>J</b> •··· | OTHER                   | THAN                   |
| (Column 1)  |  |   | (Colum       |                               | mn 2)                        | (Column 3)       | SMALL               | ENTITY                 | OR            | SMALL                   |                        |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY                 | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |               | RATE                    | ADDI-<br>TIONAL<br>FEE |
|   | Total  |   | Minus        | **                            |                              | =                | X\$ 9=              |                        | OR            | X\$18=                  |                        |
|   | Independent                                    | *   | Minus        | ***                           |                              | =                | X40=                |                        | OR            | X80=                    |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |                               |                              |                  | +135=               |                        | 1             | +270=                   |                        |
|   | ·  |   |              |                               |                              |                  |                     | _                      | OR            | TOTAL                   |                        |
| -   |  |   |              |                               |                              |                  |                     | <u> </u>               | OR            | ADDIT. FEE              |                        |
| _   |  | (Column 1)                                |              | (Colu                         | mn 2)<br>IEST                | (Column 3)       |                     |                        |               |                         |                        |
| AMENDMENT B   |  | REMAINING<br>AFTER<br>AMENDMENT           |              | NUM<br>PREVI                  | IBER<br>OUSLY<br>FOR         | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |               | RATE                    | ADDI-<br>TIONAL<br>FEE |
|   | Total  | •   | Minus        | **                            |                              | =                | X\$ 9=              |                        | OR            | X\$18=                  |                        |
|   | Independent                                    | *   | Minus        | ***                           | T CL AIN                     | =                | X40=                |                        | OR            | X80=                    |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |                               |                              |                  |                     |                        | OR            | +270=                   |                        |
|   |  |   |              |                               |                              |                  | TOTAL<br>ADDIT, FEE |                        | OR            | TOTAL<br>ADDIT. FEE     |                        |
|   | (Column 1) (Column 2) (Column 3)               |   |              |                               |                              |                  |                     |                        |               | ADDIT: 1 EE             | . •                    |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVI          | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |               | RATE                    | ADDI-<br>TIONAL<br>FEE |
|   | Total  | •   | Minus        | **                            |                              | =                | X\$ 9=              |                        | OR            | X\$18=                  |                        |
|   | Independent                                    | •   | Minus        | ***                           |                              | =                | X40=                |                        |               | X80=                    |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |                               |                              |                  | A40=                | <del> </del>           | OR            |                         | · · · ·                |
| +135=   |  |   |              |                               |                              |                  |                     |                        | OR            | +270=                   |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Tetal or Independent) is the highest number found in the appreciate box in column 1. |  |   |              |                               |                              |                  |                     |                        |               |                         |                        |